

**Amendments to the Claims:**

This listing of claims will replace all prior versions, and listing, of claims in the application:

**Listing of Claims:**

Claim 1 (canceled)

Claim 2 (previously presented): The method as recited in claim 24, wherein the discount price list is a variable discount price list that tracks a known standard service/good price list.

Claim 3 (previously presented): The method as recited in claim 24, wherein the membership fee is paid by the individual.

Claim 4 (previously presented): The method as recited in claim 24, wherein the membership fee is paid by the individual's employer.

Claim 5 (previously presented): The method as recited in claim 24, wherein the membership fee is paid by the individual's business.

Claim 6 (previously presented): The method as recited in claim 24, wherein the membership fee is a renewal fee.

Claim 7 (previously presented): The method as recited in claim 24, wherein the member includes his/her family in the health care plan.

Claim 8 (previously presented): The method as recited in claim 24, wherein the medical service/good providers are selected from the group consisting of physicians, hospitals,

physical therapists, nursing facilities, cancer treatment centers, optical and hearing aid dispensaries, hospices, clinics, pharmacies, chiropractors, dentists, medical supply stores, hospital supply stores and handicap equipment suppliers.

Claim 9 (previously presented): The method as recited in claim 24, wherein the medical service/good provider is a doctor that works for a corporation.

Claims 10-11 (canceled)

Claim 12 (previously presented): The method as recited in claim 24, wherein the basic listings are provided to medical service/good providers free of charge.

Claim 13 (previously presented): The method as recited in claim 24, wherein the premium listings are provided to medical service/good providers upon payment of a premium listing fee.

Claim 14 (previously presented): The method as recited in claim 24, wherein the premium listings include a link to a customizable web page for the medical service/good providers that is accessible via a global telecommunications network.

Claim 15 (previously presented): The method as recited in claim 24, wherein the premium listings include a link to the medical service/good provider's web site.

Claim 16 (previously presented): The method as recited in claim 24, wherein the premium listings are customized for each medical service/good provider.

Claim 17 (previously presented): The method as recited in claim 24, wherein the discount price list and the medical service/good provider listing is accessible via a global telecommunications network.

Claim 18 (previously presented): The method as recited in claim 24, wherein the discount price list and the medical service/good provider listing are searchable by the members using one or more search criteria.

Claim 19 (previously presented): The method as recited in claim 18, wherein one of the search criteria is based on geographic area

Claim 20 (previously presented): The method as recited in claim 18, wherein one of the search criteria is based on the services and goods provided by the medical service/good providers.

Claim 21 (previously presented): The method as recited in claim 24, further comprising the step of providing one or more advertisements by the network provider to the members.

Claim 22 (previously presented): The method as recited in claim 21, wherein an advertiser pays the network provider an advertising fee to provide the advertisements to the members.

Claim 23 (previously presented): The method as recited in claim 21, wherein the advertisement provided to a member is based on one or more search criteria used to search the medical service/good provider listing.

Claim 24 (previously presented): A method for providing a health care plan comprising the steps of

receiving a membership fee from one or more individuals to become members of the health care plan and participate via incentives within a member multi-level marketing

network, wherein one of the incentives includes paying a portion of each received membership fee into a multi-level marketing matrix;

obtaining information from one or more medical service/good providers that have joined the health care plan and incorporating all or part of the obtained information in a medical service/good provider listing stored on one or more storage devices communicably coupled to a server, wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers; and

providing a discount price list stored on the one or more storage devices and the medical service/good provider listing to the members via a communications interface communicably coupled to the server, wherein the discount price list comprises published rates for the services/goods provided by each medical service/good provider within two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the discount price list regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the published rate on the discount price list for the services/goods rendered by the medical service/good provider in full directly to the medical service/good provider at the time the services/goods are rendered to the members by the medical service/provider thereby providing direct, immediate and full payment to the medical service provider without any review by the health care plan or a third party.

Claim 25 (previously presented): A computer program embodied on a computer readable medium executable by a server for providing a health care plan comprising:

a code segment for receiving a membership fee from one or more individuals to become members of the health care plan and participate via incentives within a member multi-level marketing network, wherein one of the incentives includes paying a portion of each received membership fee into a multi-level marketing matrix;

a code segment for obtaining information from one or more medical service/good providers that have joined the health care plan and incorporating all or part of the obtained information in a medical service/good provider listing stored on one or more

storage devices communicably coupled to the server, wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers; and

a code segment for providing a discount price list stored on the one or more storage devices and the medical service/good provider listing to the members via a communications interface communicably coupled to the server, wherein the discount price list comprises published rates for the services/goods provided by each medical service/good provider within two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the discount price list regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the published rate on the discount price list for the services/goods rendered by the medical service/good provider in full directly to the medical service/good provider at the time the services/goods are rendered to the members by the medical service/provider thereby providing direct, immediate and full payment to the medical service provider without any review by the health care plan or a third party.

Claim 26 (previously presented): An apparatus for providing a health care plan comprising:

a server;

one or more storage devices communicably coupled to the server, the one or more data storage devices containing a discount price list and a medical service/good provider listing, wherein the discount price list comprises published rates for the services/goods provided by each medical service/good provider within two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the discount price list regulates the cost of services/goods provided to a member of the health care plan by a medical service/good provider such that the member pays the published rate on the discount price list for the services/goods rendered by the medical service/good provider in full directly to the medical service/good provider at the

time the services/goods are rendered to the members by the medical service/provider thereby providing direct, immediate and full payment to the medical service provider without any review by the health care plan or a third party, and wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers;

a communications interface communicably coupled to the server that allows the member to access the discount price list and the medical service/good provider listing; and

wherein the member is an individual that has paid a membership fee to join the health care plan and participate via incentives within a member multi-level marketing network, wherein one of the incentives includes paying a portion of each received membership fee into a multi-level marketing matrix.

Claim 27 (canceled)

Claim 28 (previously presented): A method for providing a health care plan comprising the steps of

receiving a membership fee from one or more individuals to become members of the health care plan;

obtaining information from one or more medical service/good providers that enter the health care plan and participate via incentives within a provider multi-level marketing network, wherein one of the incentives includes paying a portion of each received membership fee into a multi-level marketing matrix, and incorporating all or part of the obtained information in a medical service/good provider listing stored on one or more storage devices communicably coupled to a server, wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers; and providing a discount price list stored on the one or more storage devices and the medical service/good provider listing to the members via a communications interface communicably coupled to the server, wherein the discount

price list comprises published rates for the services/goods provided by each medical service/good provider within two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the discount price list regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the published rate on the discount price list for the services/goods rendered by the medical service/good provider in full directly to the medical service/good provider at the time the services/goods are rendered to the members by the medical service/provider thereby providing direct, immediate and full payment to the medical service provider without any review by the health care plan or a third party.

Claim 29 (previously presented): A computer program embodied on a computer readable medium executable by a server for providing a health care plan comprising:

- a code segment for receiving a membership fee from one or more individuals to become members of the health care plan;

- a code segment for obtaining information from one or more medical service/good providers that have joined the health care plan and participate via incentives within a provider multi-level marketing network, wherein one of the incentives comprises paying a portion of each received membership fee into a multi-level marketing matrix, and incorporating all or part of the obtained information in a medical service/good provider listing stored on one or more storage devices communicably coupled to the server, wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers; and

- a code segment for providing a discount price list stored on the one or more storage devices and the medical service/good provider listing to the members via a communications interface communicably coupled to the server, wherein the discount price list comprises published rates for the services/goods provided by each medical service/good provider within two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the

discount price list regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the published rate on the discount price list for the services/goods rendered by the medical service/good provider in full directly to the medical service/good provider at the time the services/goods are rendered to the members by the medical service/provider thereby providing direct, immediate and full payment to the medical service provider without any review by the health care plan or a third party.

Claim 30 (previously presented): An apparatus for providing a health care plan comprising:

a server;

one or more storage devices communicably coupled to the server, the one or more data storage devices containing a discount price list and a medical service/good provider listing, wherein the discount price list comprises published rates for the services/goods provided by each medical service/good provider within two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the discount price list regulates the cost of services/goods provided to a member of the health care plan by a medical service/good provider such that the member pays the published rate on the discount price list for the services/goods rendered by the medical service/good provider in full directly to the medical service/good provider at the time the services/goods are rendered to the members by the medical service/provider thereby providing direct, immediate and full payment to the medical service provider without any review by the health care plan or a third party, and wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers;

a communications interface communicably coupled to the server that allows the member to access the discount price list and the medical service/good provider listing; and



wherein the member is an individual that has paid a membership fee to join the health care plan and the medical service/good provider joins the health care plan and participates via incentives within a provider multi-level marketing network, wherein one of the incentives comprises paying a portion of each received membership fee into a multi-level marketing matrix.